

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	METHODS OF USING SUBSTITUTED TETRACYCLINE COMPOUNDS TO MODULATE RNA
Attorney Docket Number::	PAZ-205CP
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	1
Total Drawing Sheets::	1
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Stuart
Middle Name::	B.
Family Name::	Levy
City of Residence::	Boston
State or Province of Residence::	MA
Country of Residence::	US
Street of mailing address::	144 Warren Avenue

City of mailing address:: Boston
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 02116

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Michael
Family Name:: Draper
City of Residence:: Plaistow
State or Province of Residence:: NH
Country of Residence:: US
Street of mailing address:: 27 Partridge Lane
City of mailing address:: Plaistow
State or Province of mailing address:: NH
Postal or Zip Code of mailing address:: 03865

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Mark
Middle Name:: L.
Family Name:: Nelson
City of Residence:: Wellesley
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 735 Worcester Road
City of mailing address:: Wellesley
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 02481

Applicant Authority Type:: Inventor

Status:: Full Capacity
Given Name:: Graham
Family Name:: Jones
City of Residence:: Needham
State or Province of Residence:: MA
Country of Residence:: US
Street of mailing address:: 55 Fay Lane
City of mailing address:: Needham
State or Province of mailing address:: MA
Postal or Zip Code of mailing address:: 02494

Correspondence Information

Correspondence Customer Number:: 00959

Representative Information

Representative Customer Number:: 00959

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application claiming the benefit under 35 USC 119(e)	60/421248	10/24/02